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CONFIRMATION NO. 5571

<b>SERIAL NUMBER</b> 09/940,266	<b>FILING OR 371(c) DATE</b> 08/27/2001 <b>RULE</b>	<b>CLASS</b> 607	<b>GROUP ART UNIT</b> 3762	<b>ATTORNEY DOCKET NO.</b> 032580.0028.CIP1
<b>APPLICANTS</b> Gust H. Bardy, Seattle, WA; Riccardo Cappato, Ferrara, ITALY; William J. Rissmann, Coto de Caza, CA; <i>KDM verified</i>				
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/663,607 09/18/2000 and is a CIP of 09/663,606 09/18/2000 PAT 6,647,292 <i>KDM verified</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>none KDM</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 09/19/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>W. J. Rissmann</i> Examiner's Signature <i>KDM</i> Initials		<b>STATE OR COUNTRY</b> WA	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 120
				<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 28075				
<b>TITLE</b> Biphasic waveform for anti-tachycardia pacing for a subcutaneous implantable cardioverter-defibrillator				
<b>FILING FEE RECEIVED</b> 1360	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	